



We are pleased to bring you the 2015-2016 University of Texas System (UT System) Student Health Insurance Plan

Underwritten by Blue Cross and Blue Shield of Texas (BCBSTX)

- Affordable, quality coverage compatible with the Affordable Care Act
- Academic Emergency Services (AES)*
- Covers you at school, at home and while traveling abroad
- Access to the broad BCBSTX Blue Choice PPOSM Network
- Access to multilingual 24/7 Nurseline
- Discounts on vision, fitness and much more

Who can enroll?

Health Institution Students (Hard Waiver)

All Health Science Center and medical students are automatically enrolled in the Student Health Insurance Plan at registration unless proof of comparable coverage is furnished.

International Students (Mandatory)

All international students holding non-immigrant visas are eligible and are required to purchase this Student Health Insurance Plan in order to complete registration, except for those students who provide proof of comparable coverage in writing.

All Other Students (Voluntary)

All other fee-paying students at an institution of UT System who are taking credit hours, graduate students working on research/dissertation or thesis, post doctorate students, scholars, fellows and visiting scholars are eligible.

Enrollment is easy! Health Institution and International students are automatically enrolled in the Student Health Insurance Plan unless proof of comparable coverage is furnished.

All other students may enroll via our website. Go to **utsystem.myahpcare.com** to "Find Your Campus" then click on the "Enroll Online" link and follow the online instructions.

Please read the plan brochure in full to determine whether this Student Health Insurance Plan is right for you! The plan brochure provides details of the coverage including benefits, exclusions and any reductions or limitations and the terms under which the Policy may be continued in force. The plan brochure is available online at **utsystem.myahpcare.com.**

For dates and rates specific to each UT System campus, please visit our website at **utsystem.myahpcare.com** to "Find Your Campus" then click on the applicable enrollment form.

Dependent coverage is available. To view rates and enrollment information, please go to **utsystem.myahpcare.com**.

You get online access to:

- View and download complete plan description
- Find provider and pharmacy information
- Download eligibility/enrollment information
- Download a temporary ID card
- Customer service, claims and benefit information

^{*} Academic Emergency Services (AES) is a global emergency services product provided by On Call International, a separate and independent company. AES provides medical evacuation, repatriation, accidental death and dismemberment benefits, emergency medical and travel assistance, travel information and other services for Academic HealthPlans (AHP). On Call International is solely responsible for its products and services.

UT System 2015-2016 Plan Highlights^{1,2}

Preventive Care Services

| Benefit Maximum & Deductibles | | |
|---|---|---|
| | Network Provider | Out-of-Network Provider |
| Benefit Maximum | Unlimited | Unlimited |
| Deductible (Individual/Family) | \$500/\$1,500 | \$1,000/\$3,000 |
| Out-of-Pocket Maximum (Individual/Family) | \$6,600/\$12,700 | \$13,200/\$37,500 |
| Student Health Center | If the Institution has a Student Health Center, the Deductible will be waived and benefits will be paid at 100% of Covered Expenses incurred at the Student Health Center | |
| Benefit Coverage | | |
| | Network Provider (deductible applies unless noted below) | Out-of-Network Provider (deductible applies unless noted below) |
| Hospital Expenses | 80% | 60% |
| Surgical Expenses | 80% | 60% |
| Doctor's Visits | 100% (deductible waived) \$20 primary care copayment per visit; \$40 specialist copayment per visit | 60% |
| Facility Services – Copayment is waived if the insured is admitted; inpatient hospital expenses will apply. | 80% after \$150 copayment (deductible waived) | |
| Physician Services | 80% | |
| Diagnostic X-Rays & Laboratory Procedures | 80% | 60% |
| Prescription Drugs Per 30-day Retail Supply (deductible waived) | At at pharmacies contracting with Prime Therapeutics*, 100% after: • \$15 copayment for each generic drug • \$30 copayment for each preferred brand-name drug • \$50 copayment for each non-preferred brand-name drug 80% of allowable amount for each specialty drug | \$15 copayment for each generic drug \$30 copayment for each preferred brand-name drug \$50 copayment for each non-preferred brand-name drug 60% of allowable amount for each specialty drug Please note: You are required to pay the full amount charged at the time of service for all prescriptions dispensed at an out-of-network provider and must file a claim for reimbursement. |

For additional information, go to utsystem.myahpcare.com, or call 855-247-7587.

100% (deductible waived)

60%

¹ This document is for informational purposes only and is neither an offer of coverage nor medical advice. It contains only a partial, general description of plan benefits and programs and does not constitute a contract. Covered expenses are subject to plan maximums, limitations and exclusions as described in the Policy. The PPO network is BCBSTX BlueChoice Preferred Provider Organization Network.

² Covered charges at in-network and out-of-network providers are based on the allowable amount. For more information, please see your Brochure Booklet or Policy.

^{*} The relationship between Blue Cross and Blue Shield of Texas (BCBSTX) and contracting pharmacies is that of independent contractors, contracted through a related company, Prime Therapeutics LLC. Prime Therapeutics also administers the pharmacy benefit program. BCBSTX, as well as several other independent Blue Cross and Blue Shield Plans, has an ownership interest in Prime Therapeutics.